17FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB Number: 3235-0076

Expires: August 31, 1998
Estimated average burden
hours per response 16.00

SEC USE ONLY



Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.)									
Private Offering of Common Stock									
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 506 ☐ Section 4(6) ☐ ULOE									
Type of Filing: New Filing Amer	ndment			PD					
A. BASIC IDENTIFICATION DATA									
1. Enter the information requested about th	e issuer								
Name of Issuer (check if this is an amer	ndment and name has chan	ged, and indi	cate change.)) 1	FEB 0 5 2007				
Visual Management Systems Holding, Inc.									
Address of Executive Offices (Number and Street, City, St	ate, Zip Code) Telephon	e Number (ir	nclu rdings s om Code)				
1000 Industrial Way North, Suite C, Toms Riv	ver, N.J. 08755		(732) 281	I-1355	FINANCIAL				
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (including Area Code (if different from Executive Offices)									
Brief Description of Business									
Visual Management Systems Holding, Inc. is in the business of designing and installing remote management systems for loss prevention, physical security, asset protection and management controls.									
Type of Business Organization ☐ corporation ☐ limited partnership, already formed ☐ other (please specify): ☐ business trust ☐ limited partnership, to be formed									
	N	fonth Y	'ear						
Actual or Estimated Date of Incorporation or	Organization:	09	2004	☑ Actual	☐ Estimate				
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:									
· -	CN for Canada; FN for other			NJ					

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA										
Enter the information requested for the following:										
 Each promoter of the issuer, if the issuer has been organized within the past five 	years;									
securities of the issuer;	 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class equity 									
 Each executive officer and director of corporate issuers and of corporate general issuers; and 	l and managing pa	artners of partnership								
Each general and managing partner of partnership issuers.										
Check Box(es) that apply ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer	☐ Director	General and/or Managing Partner								
Full Name (Last name first, if individual)										
Gonzalez, Caroline										
Business or Residence Address (Number and Street, City, State, Zip Code)										
1000 Industrial Way North, Suite C, Toms River, NJ 08755										
Check Box(es) that apply ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer	√ ☑ Director	General and/or Managing Partner								
Full Name (Last name first, if individual)	<u> </u>									
Gonzalez, Jason										
Business or Residence Address (Number and Street, City, State, Zip Code)										
1000 Industrial Way North, Suite C, Toms River, NJ 08755										
Check Box(es) that apply Promoter Beneficial Owner Executive Officer	Director	General and/or								
_		Managing Partner								
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that apply Promoter Beneficial Owner Executive Officer	r Director	☐ General and/or Managing Partner								
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that apply Promoter Beneficial Owner Executive Office	r Director	☐ General and/or Managing Partner								
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that apply ☐ Promoter ☐ Beneficial Owner ☐ Executive Office	r Director	☐ General and/or Managing Partner								
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										

В. 1	NFORMAT	ION ABO	UT OFF	ERING										
B. INFORMATION ABOUT OFFERING									Yes	No				
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										\boxtimes				
Answer also in Appendix, Column 2, if filing under ULOE.								5 0.0	NO (4)					
2. What is the minimum investment that will be accepted from any individual?										00 (1)				
_	Daga tha a		erenië ininë	aaarab	in of a air	nala unit?							Yes ⊠	No □
												ectly any		ш
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering.														
	If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons													
	state or sta of such a b										are asso	ciated person	S	
	Name (Las				7 10141 111	3 1111011110		ut brono.	0. 000.0	Orny.				
				,										
Busi	iness or Re	sidence /	Address (Number a	and Stree	t, City, S	ate, Zip (Code)						
			`			•	·							
Nan	ne of Assoc	iated Bro	ker or De	aler							•			
Stat	es in Which	n Person I	Listed Ha	s Solicite	d Purcha	sers				<u> </u>				
(Che	eck "All Sta	tes" or ch	eck indivi	dual Stat	es)							_	All States	5
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]	[iN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
(MT		[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	(ND)	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	(WI)	[WY] .	[PR]		
Full	Name (Las	t name fir	rst, if indiv	vidual)										
						. 0:: 0	. = .	S 7.3						
Busi	ness or Re	sidence A	Address (Number a	and Stree	t, City, Si	ate, Zip (Jode)						
Nlam	ne of Assoc	istad Dra	kar ar Da	alas			· · · · ·			-				
N/A	IE OI ASSUC	ialeu bro	Ker Or De	aler										
	es in Which	Person I	l isted Ha	s Solicite	d Purcha	sers								
_	eck "All Stat												All States	S
[AL]		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[TV]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full	Name (Las	t name fir	st, if indiv	/idual)										
N/A														
Busi	ness or Re	sidence A	Address (Number a	and Stree	t, City, S	ate, Zip (Code)						
Nam	e of Assoc	iated Bro	ker or De	aler				<u> </u>			_			
N/A														
States in Which Person Listed Has Solicited Purchasers														
	ck "All Stat												All States	5
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	(HI)	[ID]		
[IL]	[IN]	[IA]	(KS)	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]		[NV]	(NH)	[NJ]	[NM]	[NY]	[NC]	(ND)	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	{PR}		

(1) Subject to adjustment in issuer's discretion.

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate ffering Price	Am	ount Already Sold
	Debt	\$ 0	\$	0
	Equity	\$ 470,000	\$	470,000
	☑ Common ☐ Preferred			
	Convertible Securities (including warrants)	\$ 0	\$	0
	Partnership Interests	\$ 0	\$	0
	Other (Specify)	\$ 0	\$	0
	Total	470,000	\$	470,000
	Answer also in Appendix, Column 3, if filing under ULOE			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Number Investors	Do	Aggregate ollar Amount Purchases
	Accredited Investors	20	\$	470,000
	Non-accredited Investors	 0	\$	0
	Total (for filings under Rule 504 only)	 		
	Answer also in Appendix, Column 4, if filing under ULOE			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.			
	Type of offering	Type of Security	Do	ollar Amount Sold
	Rule 505	 N/A	\$	
	Regulation A	 	\$	
	Rule 504		\$	
	Total		\$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		\$	
	Printing and Engraving Costs		\$	
	Legal Fees		\$	1,000
	Accounting Fees		\$	
	Engineering Fees		\$	
	Sales Commissions (specify finders' fees separately)		\$	
	Other Expenses (identify) Miscellaneous Filing Fees	_ ⊠	\$	1,000
	Total		\$	2 000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	D. OFFERING PRICE NUM	BER OF INVESTORS, EXPENSES AND USE	: OF	PR	OCEEDS			
	b. Enter the difference between the aggregate Question 1 and total expenses furnished in resp difference is the "adjusted gross proceeds to the	offering price given in response to Part C –			002200		468,000	
5.	Indicate below the amount of the adjusted gross be used for each of the purposes shown. If the an estimate and check the box to the left of the must equal the adjusted gross proceeds to the i Question 4.b above.	amount for any purpose is not known, furnish estimate. The total of the payments listed						
				D	ayments to Officers, irectors, & Affiliates		Payments To Others	
	Salaries and fees			\$	N/A		\$ N/A	
	Purchase of real estate			\$			<u>\$</u>	
	Purchase, rental or leasing and installation of m	achinery and equipment		\$			<u>\$</u>	
	Construction or leasing of plan buildings and fac	cilities		\$			\$	
	Acquisition of other business (including the valumay be used in exchange for the assets or secumerger)	urities of another issuer pursuant to a		s			s	
	Repayment of indebtedness						\$	
	Working capital						\$ 498,000	
	Other (specify)			-		_	\$	
	, , , , ,							
	Column Totals			_			\$	
	Total Payments Listed (column totals added)		×			\$498,000		
	- 1	E. FEDERAL SIGNATURE						
cor	issuer has duly caused this notice to be signed by the stitutes an undertaking by the issuer to furnish to the U ished by the issuer to any non-accredited investor purs	.S. Securities and Exchange Commission, upon writ						
lss	uer (Print or Type)	Signature	Date					
Vis	ual Management Systems Holding, Inc.	1 Man		Janı	uary 18, 200	7		
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)						
Jas	on Gonzalez	Vice President						
								

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)